



POTENTIALLY PREVENTABLE HOSPITALIZATIONS IN MASSACHUSETTS

FISCAL YEARS 2004-2008

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This report explains the impact of potentially preventable hospitalizations in the Massachusetts health care system. It includes information on: 1) the number and cost of preventable hospitalizations (PHs) in Massachusetts; 2) the most prevalent PH conditions; 3) PH admission rates in Massachusetts compared to the nation and changes in those rates over time; and 4) PH rates for counties, payers, race/ethnicities, age, and gender.

What are preventable hospitalizations and what are their implications?

Preventable hospitalizations (PHs) are the inpatient treatment of conditions for which outpatient care might prevent the need for such hospitalizations or for which early intervention might prevent complications or more severe disease. Inpatient treatment is care that requires a patient to stay overnight in a hospital; outpatient care may be provided in a hospital, physician, or clinic setting, but does not involve an overnight stay. Measuring PHs is important because it can indicate problems involving access to primary care in specific geographic areas or for certain segments of the population. It also identifies potential cost savings for the health care system and opportunities for quality improvement.

How prevalent is preventable hospitalization in Massachusetts and what are its costs?

- PHs accounted for 13% of inpatient admissions in Massachusetts among residents ages 18 and older and accounted for an estimated \$639 million in hospital costs in 2008.
- Massachusetts' risk-adjusted rates of preventable hospitalization are lower than or similar to the national rates for 9 of 12 PH conditions, but are higher than national rates for chronic obstructive pulmonary disease (COPD), urinary tract infection (UTI), and asthma.
- There was a 7% decrease in PH rates overall in Massachusetts from 2004 through 2008. This decrease, however, varied by condition and for two conditions—hypertension and UTI—rates increased.

How do preventable hospitalizations differ by patient demographic?

- Blacks had significantly higher rates for most PHs including diabetes-related conditions, asthma, congestive heart failure, and hypertension compared to whites and Hispanics. The rate of inpatient admission for COPD, on the other hand, was twice as high for whites compared to blacks and 4.5 times higher than for Hispanics.
- Residents in Essex, Plymouth, and Worcester counties had an overall PH rate that was 16% to 26% higher than the statewide rate, while rates for Barnstable, Berkshire, Hampden, and Hampshire county residents ranged from 18% to 25% lower than the statewide rate.

About DHC FP

The mission of the Division of Health Care Finance and Policy is to improve health care quality and contain health care costs by critically examining the Massachusetts health care delivery system and providing objective information, developing and recommending policies, and implementing strategies that benefit the people of the Commonwealth.